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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2007		Complete if Known	
		Application Number	10/627,327-Conf. #2282
		Filing Date	July 25, 2003
		First Named Inventor	James P. RICHMOND
		Examiner Name	A. K. Seye
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	2194
TOTAL AMOUNT OF PAYMENT		Attorney Docket No.	ENB-008RCE
		(\$)	910.00

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: <u>12-0080</u> Deposit Account Name: <u>Lahive & Cockfield, LLP</u>
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
		Small Entity		Small Entity		Small Entity	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____
2. EXCESS CLAIM FEES							
							Small Entity
Fee Description							Fee (\$)
Each claim over 20 (including Reissues)							50
Each independent claim over 3 (including Reissues)							200
Multiple dependent claims							360
Total Claims							
<u>24</u> - 26 = _____ x _____ = _____							
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims							
<u>4</u> - 4 = _____ x _____ = _____							
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof			Fee (\$)	Fee Paid (\$)	
_____ - 100 = _____	/50 = _____	(round up to a whole number) x _____			= _____		
4. OTHER FEE(S)							
							Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 ...							790.00
1251 Extension for response within first month							120.00

SUBMITTED BY			
Signature	<u>Daniel R Burns</u>	Registration No. (Attorney/Agent)	46,590
Name (Print/Type)	David R. Burns	Telephone	(617) 994-0890
		Date	September 4, 2007



Express Mail Label No. EV 956 468 235 US Dated: September 4, 2007

Docket No.: **ENB-008RCE**
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
James P. Richmond *et al.*

Application No.: 10/627,327

Confirmation No.: 2282

Filed: July 25, 2003

Art Unit: 2194

For: A USER INTERFACE FOR EDITING
OBJECTS OF A NETWORK OBJECT
DATABASE

Examiner: A. K. Seye

REQUEST FOR CHANGE OF ATTORNEY DOCKET NUMBER

MS RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

The Attorney Docket Number of the above-identified patent application has changed.
Please take notice that the Attorney Docket Number for this application should now be as
follows:

ENB-008RCE

Please reference **ENB-008RCE** on all future correspondence.

Dated: September 4, 2007

Respectfully submitted,

By David R. Burns
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